



**MEMBERSHIP APPLICATION**

Date: \_\_\_\_\_

**Please Check One:**

- Business (\$100/yr)       Banks & Utility Co. (\$150/yr)       Additional Business (\$50/yr per business)  
 Individual (\$35/yr)       Large Business 50+ employees (\$150/yr)       Church & Civic Club (\$50/yr)

**Please Complete Information:**

Name of Business / Organization / Individual: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

Facebook Page: \_\_\_\_\_

Category of Business / Organization for Directory & Nocona CofC Website: \_\_\_\_\_

Primary Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Other Representative: \_\_\_\_\_ Title: \_\_\_\_\_

Date Business / Organization established: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

**Office Use ONLY:**

Application Received: \_\_\_\_\_ Payment of \$ \_\_\_\_\_ deposited \_\_\_\_\_

Database Entry: \_\_\_\_\_ Website Entry: \_\_\_\_\_

Email Entry: \_\_\_\_\_ QB Entry: \_\_\_\_\_

Ribbon Cutting (where and when): \_\_\_\_\_